



Federal Communications Commission

Hearing Aid Compatibility Status Report (FCC Form 655)

Reporting Period: January 1, 2009 - December 31, 2009

Filing Confirmation Number: 0004089729

Filing Deadline: January 15, 2010

FRN: 0001609932

General Report Information

Type of Company

Service Provider

De Minimis Exception

Did you offer more than two handsets over any air interface to service providers (if you are a device manufacturer) or to subscribers (if you are a service provider) during this reporting period? No

Did you offer any handsets to service providers (if you are a device manufacturer) or to subscribers (if you are a service provider) during this reporting period? Yes

Company Information

Company Name: PVT Wireless Limited Partnership
PO Box:
Street Address: 4011 West Main
City: Artesia
State: NM
Zip Code: 88210

Contact Name: Bob Crumrine
Contact Phone: (575) 748-1241
Contact Fax:
Contact Email: bcrumrine@pvt.com

Filing Agent

Is this report being filed by an agent on behalf of a manufacturer or service provider? Yes

Agent Name: Blooston Mordkofsky Dickens Duffy & Prendergast, LLP
PO Box:
Street Address: 2120 L Street, NW Suite 300
City: Washington
State: DC
Zip Code: 20037

Contact Name: D. Cary Mitchell
Contact Phone: (202) 828-5538
Contact Fax:
Contact Email: cary@bloostonlaw.com

Product Labeling

Do all hearing aid-compatible handsets include labeling? Yes

Explain:

Do all hearing aid-compatible handsets with the Wi-Fi air interface have clear and effective disclosure that the handset has not been tested for hearing aid compatibility with respect to its Wi-Fi voice operation? Yes

Explain:

Public Website

Does your company maintain a public website describing all hearing aid-compatible models, the ratings of those models, and an explanation of the rating system? No

Website address:

Explain: PVT Wireless Limited Partnership (“the Company”) is a small rural CMRS service provider with operations that utilize a UTStarcom PAS™ wireless access platform. Because the Company offers only one type of digital wireless handset (the UTStarcom model UTS-708j), the Company qualifies for the de minimis exception to the Hearing Aid Compatibility (“HAC”) rules, described in Rule Section 20.19 (e)(1).

Consumer Outreach

Describe consumer outreach efforts in the past 12 months: n/a

Methodology for Functionality Levels

n/a

Report Remarks

Handset 1: UT Starcom UTS-708j

Handset Maker

UT Starcom

Handset Model Name

UTS-708j

FCC ID

06YUTS-708J

Air Interfaces/Frequency Bands

1900 MHz PHS

Wi-Fi Interface

Is this handset capable of Wi-Fi voice operations? No

Dates

This handset model was offered from: 06/01 to 12/09

Ratings

M-Rating:

T-Rating:

Functionality Level

Basic

Remarks

As a practical matter, to the extent the Company’s customers utilize the UTStarcom fixed wireless equipment at their home or office, they are able to utilize traditional analog telephones and other devices which do not do not generally cause interference problems for hearing aid users.

Certification

This Report has been certified by:

Bob Crumrine Vice President - Finance & Accounting
01/12/2010

Referenced Copy